

**Authority:** 15 U.S.C. 636(a)(24); 13 CFR 120.3.

**Eric R. Zarnikow,**

*Associate Administrator, Office of Capital Access.*

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## SMALL BUSINESS ADMINISTRATION

### Revocation of License of Small Business Investment Company

Pursuant to the authority granted to the United States Small Business Administration by the Final Order of the United States District Court of Maryland, Baltimore Division, dated June 17, 2008, the United States Small Business Administration hereby revokes the license of Anthem Capital, L.P., a Delaware limited partnership, to function as a small business investment company under the Small Business Investment Company License No. 0373-0200 issued to Anthem Capital, L.P. on September 26, 1994 and said license is hereby declared null and void as of June 31, 2008.

United States Small Business Administration.

Dated: September 8, 2008.

**A. Joseph Shepard,**

*Associate Administrator for Investment.*

[FR Doc. E8-21715 Filed 9-16-08; 8:45 am]

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## SOCIAL SECURITY ADMINISTRATION

### Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law (Pub. L.) 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes revisions to OMB-approved information collections and extensions (no change) of existing OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize the burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, email, or fax your comments and recommendations on the information

collection(s) to the OMB Desk Officer and the SSA Reports Clearance Officer to the addresses or fax numbers listed below.

(OMB), Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202-395-6974, e-mail address: [OIRA\\_Submission@omb.eop.gov](mailto:OIRA_Submission@omb.eop.gov). (SSA), Social Security Administration, DCBPM, Attn: Reports Clearance Officer, 1333 Annex Building, 6401 Security Blvd., Baltimore, MD 21235, Fax: 410-965-6400, e-mail address: [OPLM.RCO@ssa.gov](mailto:OPLM.RCO@ssa.gov).

I. The information collections listed below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. Therefore, your comments would be most helpful if you submit them to SSA within 60 days from the date of this publication. Individuals can obtain copies of the collection instruments by calling the SSA Reports Clearance Officer at 410-965-0454 or by writing to the e-mail address listed above.

1. *Supplement to Claim of Person Outside the United States—20 CFR 404.460, 404.463, 422.505(b), 42 CFR 407.27(c)—0960-0051.* SSA uses the information collected from Form SSA-21 to determine continuing entitlement to Social Security benefits and the proper benefit amounts of alien beneficiaries living outside the United States. SSA also uses the information to determine whether benefits are subject to withholding tax. The respondents are individuals entitled to Social Security benefits who are, will be, or have been residing outside the United States.

*Type of Request:* Revision of an OMB-approved information collection.

*Number of Respondents:* 35,000.

*Frequency of Response:* 1.

*Average Burden per Response:* 10 minutes.

*Estimated Annual Burden:* 5,833 hours.

2. *Coverage of Employees of State and Local Governments—20 CFR 404, Subpart M—0960-0425.* The Code of Federal Regulations at 20 CFR 404 prescribe the rules for states submitting reports of deposits and related recordkeeping to SSA. States (and interstate instrumentalities) are required to provide wage and deposit-related contribution information for pre-1987 periods. The respondents are state and local governments or interstate instrumentalities.

*Type of Request:* Extension of an OMB-approved information collection.

*Number of Respondents:* 52.

*Frequency of Response:* 1.

*Average Burden per Response:* 1 hour.

*Estimated Annual Burden:* 52 hours.

3. *Medical Report on Adult with Allegation of Human Immunodeficiency Virus Infection; Medical Report on Child with Allegation of Human Immunodeficiency Virus Infection—20 CFR 416.993-416.994-0960-0500.* SSA uses Forms SSA-4814-F5 and SSA-4815-F6 to collect information necessary to determine if an individual with Human Immunodeficiency Virus (HIV) infection, who is applying for Supplemental Security Income (SSI) disability benefits, meets the requirements for presumptive disability payments. The respondents are the medical sources of the applicants for SSI disability payments.

*Type of Request:* Revision of an OMB-approved information collection.

*Number of Respondents:* 59,100.

*Frequency of Response:* 1.

*Average Burden per Response:* 10 minutes.

*Estimated Annual Burden:* 9,850 hours.

4. *Application To Collect a Fee for Payee Services—20 CFR 404.2040(a), 416.640(a) 416.1103(f)—0960-0719.* SSA uses Form SSA-445 to collect information to make a determination whether to authorize or deny permission to collect fees for payee services. The respondents are private sector businesses or state and local government offices applying to become a fee-for-service organizational representative payee.

*Type of Request:* Extension of an OMB-approved information collection.

*Number of Respondents:* 100.

*Frequency of Response:* 1.

*Average Burden per Response:* 10 minutes.

*Estimated Annual Burden:* 17 hours.

5. *Request To Be Selected as a Payee—20 CFR 404.2010-404.2055, 416.601-416.665-0960-0014.* An individual applying to be a representative payee for a Social Security or SSI recipient completes Form SSA-11-BK. SSA designed the form to aid the investigation of a payee applicant. SSA uses the information to establish the applicant's relationship to the beneficiary, his/her justification and his/her concern for the beneficiary, as well as the manner in which the applicant will use the benefits. The respondents are representative payee applicants for Titles II, VIII, XVI.

*Type of Request:* Revision of an OMB-approved information collection.

*Number of Respondents:* 1,500,000.

*Estimated Annual Burden:* 248,335 hours.